Effectiveness of Reiki and Existential Therapy in Managing Body Pain Intensity and Insomnia Among Women

SYNOPSIS

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Abstract

Women play a vital role in every culture and are multifaceted. Being a woman is a disguised blessing. They faces problems or challenges in their day to day life either socially or physically. Body pain and Insomnia are the remnants of this age of high demand and stress. Reiki and Existential Therapy is an integrated model of noninvasive alternative therapy and psychotherapy that has the potential to reduce symptoms of insomnia, pain and improve holistic well-being. Total of 124 participants aged 36-64 are selected by Purposive sampling and 93 of the participants in experimental group(reiki, Existential therapy and integrated therapy) and 31 in waitlist control group were randomly assigned. Before, After and Follow-up with Waitlist Control Group Design (Randomised Control Trial method) was used for the study. A mixed method approach was used for pain and insomnia assessment among the participants. After the intervention to the three experimental groups over a period of three months with 18 sessions. Pain and insomnia was reassessed, also follow-up was also done with the same tool. The data was analyzed using the Design Expert Software version 13 for Response Surface Methodology (RSM) for process optimization.in Design of Experiments (DoE), SPSS 25 for repeated measures MANOVA and Atlas ti 25 were used. Results revealed that Reiki and Existential therapy(integrated intervention model) is more effective in reducing the levels of Pain and insomnia among women. Interventions to overcome pain and insomnia can significantly improve the well-being and overall mental health of women.

Keywords: *Pain, Insomnia, Middle Adulthood Women, Reiki, Existential Therapy*

"Each time a woman stands up for herself, without knowing it possibly, without claiming it, she stands up for all women." **- Maya Angelou**

Women are vital to our culture from conception to eternal sleep. Being a woman is a disguised blessing. Feminine developmental stages go from maiden, wife, mother, crone, and healer. She does her part patiently and without thinking, asking for nothing in return. Across time, the pivotal role of women in society has guaranteed the steadiness, advancement, and sustained growth of countries.

Pain is a challenging phenomenon with a bothersome sensation that can vary from minor discomfort to intense suffering and it involves sensory and emotional experience. When it comes to the prevalence and degree of pain-related disability, women are more affected by both episodic and chronic pain than men are. Women's complaints of pain start to rise in frequency around midlife, which is a significant time. Pain has not been commonly acknowledged as a sign of the menopausal transition outside of the menopause research field, despite the fact that sex hormones are known to impact and control pain.

Women experience physical and mental health issues as a result of their transition into late midlife and loss of reproductive potential. Cardiovascular disorders, musculoskeletal disorders involving joint pain, neurological disorders of the limbs and joints, weight loss or gain, reproductive disorders, and psychological disorders such as anxiety, depression, irritability, forgetfulness, low concentration, panic attacks, and loss of confidence are examples of these physical health issues (Agarwal et al., 2018).

Insomnia is a condition where a person has trouble getting enough sleep, could be due to physical discomfort or psychological disturbances . A sleep disorder called insomnia makes it difficult to go to sleep and remain asleep. Almost everyone experiences periods of insomnia from time to time. However, someone is probably experiencing chronic insomnia if they have trouble falling asleep or if they wake up throughout the night or early morning and find it difficult to get back to sleep. This should occur at least three times a week for a few months.

In Indian scenario, As women enter menstruation, their risk of developing insomnia increases by 2.75 times. This risk persists throughout adulthood as a result of hormonal fluctuations, pregnancy, illnesses, stress, and complicated domestic life. Eighty percent of

women with severe hot flashes report having chronic sleeplessness. Sleep problems are common among older adults over 60, with 60% of them experiencing insomnia.(Hamblin JE,2007)

Reiki originated in the energy healing traditions of Japan. According to the theory behind the technique, an initiated reiki healer transfers this universal energy onto the recipient through their hands in order to promote healing and balance. Reiki can help us develop positive, healthy qualities like patience, love for others and ourselves, and non-competitiveness. Existential Therapy is a form of psychotherapy (talk therapy) called existential therapy helps people who feel lost, despairing, or alienated to utilise their free choice to find a sense of significance in their lives. Existentialism, a philosophy that holds that existence is "meaningless" and that meaning can only be discovered via one's own decisions, is the foundation of existential therapy.One It supports the idea that every individual is accountable for their own actions. "At its broadest level, this 'existential attitude' seeks to bring back to contemporary notions of psychotherapy a stance that re-emphasises a crucial aspect that is contained within the original meaning of therapeia – namely, the enterprise of 'attending to' another via the attempt to be beside, or with, that other as he or she is being and acts in or upon the world" (Evans, 1981)

Review of literature

Studies on Reiki and Existential therapy

A total of 1411 Reiki sessions were conducted by Trent et al., (2021) and included in the analysis. Statistically significant improvements were observed for all outcomes of psychological and physical health, including pain, drowsiness, tiredness, nausea, appetite, shortness of breath, anxiety, depression, mood, and overall wellbeing, with moderate to large effect. The results from this large-scale multi-site effectiveness trial suggest that a single session of Reiki improves physical and psychological health.

This study by *Gulia and Sreedharan (2023)* aimed to attain complete emotional, physical, and mental relaxation of body and mind. In postmenopausal phase of life, regular practice of Yoga Nidra at home preferably in morning, can help in reduction in anxiety and pain associated with early morning awakenings. This nonpharmacological technique has a therapeutic potential to improve sleep quality and quantity, and overall well-being.

Bauereiß , Obermaier , Özünal and Baumeister(2019) A total of 3461 records were identified, of which 30 unique studies (3511 participants) were included in the review and 24 studies were included in meta-analyses. Existential interventions showed significant effects on existential well-being and quality of life at post-treatment, on hope at post-treatment and after 6 months and on self-efficacy at post-treatment. No significant effects were found on the remaining outcomes and time points. This systematic review and meta-analysis provides evidence that adult patients with cancer across all stages and types benefit from existential interventions. Future research should strive towards a higher standardization in particular with respect to outcome assessments

Rationale for the study

After the systematic review analysis on intervention for pain and insomnia, we could observe that there are numerous studies on the assessment and the biological analysis of pain and insomnia. But there is almost no studies which was done on a holistic intervention so a integrated psychological conceptual framework for the study was framed, using both Reiki for biofield energy flow and existential therapy for psychosoical dimension of the dependent variables (pain and insomnia)

Reiki and existential therapy, while distinct in their approaches, share some commonalities in well-being and personal growth. These are the key similarities:Both Reiki and existential therapy emphasize the importance of addressing the whole person—mind and body. They aim to promote overall well-being rather than just treating specific symptoms.

Both practices encourage individuals to take an active role in their healing and personal development. Existential therapy focuses on personal responsibility and choice, while Reiki empowers individuals to harness their own energy for healing. Both approaches value the importance of being present in the moment. Existential therapy encourages clients to confront and embrace their current experiences, while Reiki practitioners often emphasize mindfulness and the flow of energy in the present moment.

METHOD

A methodical approach to addressing the research topic is known as research methodology. 'Effectiveness of Reiki and Existential Therapy in Managing Body Pain Intensity

and Insomnia Among Women' is a study that describes the methodological approaches in detail in this chapter.

Aim

The aim of this study is " *To assess the effectiveness of Reiki and Existential therapy in managing Body Pain and Insomnia among Women"*

Research problem(questions)

After detailed analysis of the literature collected for the study, we arrived at these research problems

- What are the psychological perspectives of pain and insomnia?
- Will a Complementary alternative healing technique(Reiki) be effective in managing pain and insomnia?
- Will psychotherapy (Existential Therapy) be effective in managing pain and insomnia?
- Will an integrated psychological therapy (Reiki and Existential therapy) be effective in managing pain and insomnia?

Objectives

To find out the effectiveness of Reiki and Existential Therapy in managing Body Pain Intensity and Insomnia among Women

To identify the relationship between Body Pain Intensity and Insomnia among Women

To assess the level of Insomnia and Body Pain Intensity among Women

Hypotheses

§ There is a significant relationship between Body Pain and Insomnia among Women.

§ There is a significant differences between the before, after, and follow-up phases in managing body pain through Reiki among women.

§ There is a significant difference between before, after and follow-up phases in managing body pain through Existential Therapy among women.

§ There is a significant difference between before, after and follow-up phases in managing body pain through Reiki and Existential Therapy among women.

§ There is a significant difference between before, after and follow-up phases in managing Insomnia through Reiki among women.

§ There is a significant difference between before, after and follow-up phases in managing insomnia through Existential Therapy among women.

§There is a significant difference between before, after and follow-up phases in managing insomnia through Reiki and Existential Therapy among women.

Sampling Technique

For the present study purposive sampling is used. Purposive sampling is also known as judgement sampling. There is no minimum number of study participants required for this technique. Convenient sampling can be employed in both qualitative and quantitative research. Participants in this study were chosen for the intervention using the purposive sampling technique. When using purposive sampling, the following points are taken into account: whether the participants are available and willing to participate in the study and to express their opinions and experiences in an expressive and introspective way (Patton, M. Q., 2002). This indicates that a wide range of characteristics and qualities from a variety of age groups (36–64 years) were included in the sample that was chosen for the intervention. The participants aged 36-64 are selected by Purposive sampling and they are allotted into two groups by simple random sampling method.

Area

Participants were selected from hospitals in and around Coimbatore (Instructed by the authority not to disclose the identity), the data was collected and the intervention was administered for the

selected women. The reasons for selecting this area are as follows:

Willingness of authorities to grant permission to conduct the action research

Consent from the women to participate in the study

Inclusion criteria

- Age range from 36-64 years

- Only female participants were included
- Participants who gave consent to participate in this study

Exclusion criteria

- The participants who are not willing to participate
- The participants without Insomnia and pain were not included
- The participants who had chronic disease were not included
- The participants who were not regular for the intervention

Description of the Variables

- Independent Variable-Reiki and existential therapy
- Dependent Variable-Pain and Insomnia

Research design

Before, After and Follow-up with Waitlist Control Group Design (Randomised Control Trial method). The current study was carried out using a mixed-method research methodology. The act of collecting, evaluating, and ultimately "mixing" qualitative and quantitative data and methodologies in a single study to comprehend the research problem is known as a mixed method research design.

Tools

The Brief Pain Inventory (BPI) was developed from the Wisconsin Brief Pain Questionnaire by Cleeland (1994).

Regensburg Insomnia Scale (RIS): a rating scale for the assessment of psychological symptoms and sleep in insomnia by Croenlein (2013) .

Procedure

Need survey for the research using interview

A survey on pain and insomnia experience was done with 347.Semi-Structured interviews were conducted with 253 participants. The participants expressed their opinions, experiences, and feelings about Pain and Insomnia. The interview lasted for about 5-10 minutes and, was

transcribed verbatim. The Semi structured interview information was used for the qualitative analysis of pain and insomnia, codes were assigned in Atlas ti 25 for the network analysis of biopsychological causes and effects of pain.

RESULTS

The findings of the study are divided into three main areas. The Analysis of Data Response Surface Methodology (RSM)which is a statistical tool used in Design of Experiments (DoE) is shown in section one. The descriptive statistics of the results of the tests used to collect the data (the Body Pain Intensity and Insomnia scale) during the before intervention and after intervention phases are shown in Section two. Inferential statistics are presented in the third section of the results . It examined the Analysis of Variance of each set of scores obtained before and after the intervention to draw conclusions about participant score differences within the group.

As the insomnia levels increase, the pain levels also increase and vice versa. Hence, the hypothesis, "**There is a significant relationship between insomnia and pain among the participants"** is accepted. The independent variable for the research, is the intervention that had four groups, the experimental group 1 which received the reiki intervention, the experimental group 2 which received the existential therapy intervention, the experimental group 3 which received the reiki and existential therapy combined intervention and the waitlist control group that did not receive any intervention. The insomnia and pain (the dependent variables) levels were measured three times namely, prior to the intervention, henceforth called before intervention scores, after the intervention and also a follow-up. As there were three-time scores for two dependent variables and four groups in the independent variable, it was decided to use Two Way Repeated MANOVA (also referred to as doubly multivariate MANOVA) to statistically compute the results.

A Two Way MANOVA of repeated measures 4 {(experimental 1, experimental 2, experimental 3, and waitlist control groups) x 3 (before, after and follow-up scores of both the dependent variables, insomnia and pain)} was computed. Post hoc paired comparisons were performed to understand the effect of the interventions in the before, during and after

intervention phases on poor sleep depth and poor sleep quantity. So the hypothesis '**There is a significant difference between before, after and follow-up phases in managing insomnia through Reiki and Existential Therapy among women'** is accepted.

SUMMARY AND CONCLUSIONS

The aim of this study is *"To assess the effectiveness of Reiki and Existential Therapy in managing Body Pain and Insomnia among Women".* Based on the aim,the objectives were coined for the study:

To find out the effectiveness of Reiki and Existential Therapy in managing Body Pain Intensity and Insomnia among Women

To identify the relationship between Body Pain Intensity and Insomnia among Women

To assess the level of Insomnia and Body Pain Intensity among Women

Conclusions

After analysing the data and interpretation of the scores obtained through the Psychological

Assessments before, after and the follow-up phases of the intervention the following conclusion is made:

- There was a significant positive correlation between pain intensity and insomnia among women
- There is a significant difference in the levels of Pain and insomnia in the Before, After and follow up phases of the Reiki intervention
- There is a significant difference in the levels of Pain and insomnia in the Before, After and follow up phases of the Existential therapy intervention.
- Reiki and Existential therapy is more effective in reducing the levels of Pain and insomnia among women.
- Interventions to overcome pain and insomnia can significantly improve the well-being and overall mental health of women.

Limitations

- Better results can be obtained if other age groups were also included.
- The can include male gender as well
- The intervention can be applied to a wide variety of settings and even community outreach settings
- The research might be expanded to a diversified and cross-cultural sample.

Implications

The implications of the present study is as follows. The integrated system of interventions help in:

- Reducing tension and anxiety, resulting in a relaxing effect that promotes deeper sleep.
- Improving the state of relaxation to help manage chronic pain.
- While it is not a replacement for medical care, it can support conventional therapy.
- Promoting resilience and personal development, which may help people manage chronic pain.
- Focusing on the psychological and emotional causes of sleeplessness, including existential discomfort and anxiety.
- The whole study offers a structure for determining meaning and purpose, which can enhance overall general wellbeing.

Recommendations

Other psychological issues can be included for future studies.

The future researcher may focus on the need for the development of programs and healing techniques in order to ensure better management of pain and insomnia among women.

Health care providers can take into account about the issues of Pain and insomnia by intensifying health education in order to improve the quality of life of the women.

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